

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
Medical or Biological Waste Record-Keeping Log
ON-SITE TREATMENT

Facility Name & Address: _____										
<p>In accordance with M.G.L. c. 111 §§ 3, 5 and 127A and 105 CMR 480.000: Minimum Requirements for the Management of Medical or Biological Waste (State Sanitary Code, Chapter VIII), generators of medical or biological waste, which is treated on-site shall maintain a current record-keeping log with the following information: the exact date of treatment; the quantity of waste treated; the type of waste; the on-site treatment method with documentation of applicable process parameters, including but not limited to time, pressure, temperature and pH; the printed name and signature of the person responsible for treatment; and the quality control (QC) / challenge testing results (growth/no growth), when applicable.</p>										
Date	Quantity	Type	Treatment Method	Process Parameters					Printed Name	QC Results
				Time	Pressure	Temp	pH	(Other)	Signature	
Additional Information:										
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